

CORRESPONDENCE.

POST OCCIPITAL LYMPHADENITIS. IS IT A PRODROMAL SYMPTOM OF CHICKENPOX?

California State Journal of Medicine—On November 9, 1902, I was called to see a lady complaining of general malaise, headache in occipital region, tenderness and swelling of post occipital lymphatic glands and fever (temp. 101½), with no good explanation for either of the two latter symptoms. Palliative treatment prescribed and no diagnosis given the patient, nor made for myself, for the time being. In the afternoon of the same day a trained nurse, who was in attendance upon several nieces and nephews of my patient suffering from chickenpox, called and laughingly said, "I guess you are in for the chickenpox. Each of the older children complained exactly that way the day before they broke out." Inquiry afterward developed the truth of the statement with regard to four children, though no particular attention was paid to the remark at the time.

The next day when I called I found the eruption of chickenpox out over chest and arms and back well marked and typical. Gland tenderness and enlargement disappeared the second or third day, and eruption ran a simple and regular course.

On December 10, 1902, I was telephoned to by a lady patient, who asked what could give her such headache in the back of the head and make the glands just at the edge of the hair swell and become very tender. I asked if she had been exposed to chickenpox, and she replied, "We spent the evening one week ago with neighbors whose children were down with chickenpox." Next day the disease was well developed in her, a number of perfect vesicles having put in an appearance. Some few had accompanied the head pain and glandular derangement, but no temperature record was taken.

I can find no mention of such prodromal symptoms in any of the authorities at my command, and venture to publish the account of them in order to stimulate a watch for them amongst my colleagues, so as to determine whether they be connected with the disease, or are mere coincidences.

HENRY MAY POND.

Alameda, December 18, 1902.

It is interesting to note the occurrence of this symptom in several consecutive cases. Rarely have these glands been noticed as enlarged and tender. Varicella has been regarded as a disease notably free from definite prodromal symptoms, so much so that Henoch regards all symptoms during the invasion stage as accidental. In fact, the absence of prodromal symptoms has been one of the diagnostic points of varicella. Hyde in observing twenty cases at the Chicago Children's Home found no sign or symptom before the eruption. From its rarity, for it has been rarely observed together with sore throat, it would seem to be accidental and its diagnostic significance of doubtful value, if any. Rather is post auricular and occipital lymphadenitis a diagnostic symptom of röteln; in fact, in this disease enlargement and induration of these glands may be considered as one of the most diagnostic signs. Its occurrence is almost constant. Klaatsch

in "Ueber Röteln" (*Zeitschrift für Klinische Medizin*) states that so constant was this symptom in an epidemic, that, knowing that he had a case of exanthem to deal with, could diagnose the case in the dark by touch alone. The lymphadenitis appears often as a prodromal symptom, the glands remain swollen for a day or two after the rash appears, and then subside. In röteln the toxins seem to have a selective action for these glands, yet this symptom loses some of its importance from the fact that in measles, also, post cervical lymphadenitis occurs, though seldom, nor does it reach the extent that it does in röteln.

G. H. E.

San Bernardino, Cal., December 25, 1902.

California State Medical Society, San Francisco, Cal.—Gentlemen: I have received the December number of your JOURNAL. Have scanned it over. One item especially, on page 35, "Affiliation of the County Societies," attracted my attention. Upon this subject I agree with you *caeteris paribus*. But to say what I wish to convey, I shall have to preface my remarks by saying that the so-called "Medical Society of California" consists largely of the doctors of San Francisco and bay counties around San Francisco. It is true there is no direct prohibition of outsiders, but the management of that Society is such that it does prohibit us from participating in its affairs. We are invited to come there, pay our dues, and then be "wall flowers" the balance of the session. Those who rate themselves as our superiors in all things, and medical subjects especially, have the floor. I have been in the medical profession many years; a member of the American Medical Association nearly as many years; was a member of the State and County Association before I came to California. I was admitted to membership in what is termed the "Medical Society of the State of California" in the year 1890. I am now a member of the San Bernardino County Medical Society and of the Southern California State Medical Society.

Soon after I was admitted to membership in your Society I offered a paper, but was politely informed that "there was no room for me." I pocketed my insult and discontinued paying dues, and, of course, my name was dropped from the roll of the Society; but as time wore on I hoped matters had changed. Having frequently received invitations to meet with you, last spring I concluded to again participate in the affairs of the Society by reading a paper. I so advised the president and he kindly referred my request to a committee (investigation, I presume). After waiting many days I was advised that "there was no room for me." It is needless to say that I was not at the meeting of the Association.

Gentlemen, there is one way of getting the county associations outside of the bay counties, and especially in Southern California, to participate with you, viz: make your Association in fact what it is in name. If the Big Guns in the city of San Francisco must display their erudition to each other, they should flock together in an association under a different name as a distinguishing mark of their ability.

We have two good societies in this county, one local and the other the San Bernardino County Medical Society. When we are accorded equal treatment with the Large Guns we will come in with you and not be slow in pushing the cause of our profession